



Public Tree Order Form

Contact Information (this information will be kept in our database for future contact)
Please Print Legibly

Name: _____

Street: _____

Town, City, Zip: _____

Phone 1: _____ Phone 2: _____

Email Address: _____

Quantity	Species*	Cost

****Specific trees for public planting cannot be guaranteed. We will try to honor any requests made.***

I agree to permit access to my property for the purpose of planting trees in the **PUBLIC TREE BELT ONLY**. Crews will be supervised by the Replanting Monson Tree Committee or the DCR Bureau of Forestry personnel for the purposes of replanting street trees throughout the tornado affected areas of Monson. This access is being granted for the specific and sole purpose of work associated with the planting of trees on my property within the tree belt.

I understand that the Replanting Monson Tree Committee has worked hard to secure funds to provide trees in both public and private locations throughout the tornado affected area. In order to protect these trees, I agree to carry out a 2-year maintenance program for any tree(s) that are received as part of this program in accordance with the verbal/written instructions provided to me by the Replanting Monson Tree Committee and/or the DCR Bureau of Forestry staff.

Landowner Signature: _____ Date: _____

My property has been designated for:

____ Shade Tree(s) ____ Flowering Tree(s) ____ Conifer(s)

Please return form to:
Replanting Monson Tree Committee, 29 Thompson Street, Monson, MA 01057